From: 0000000000

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Date: 2/5/2015 1:55:20 PM

MV-984 (1-2/11)



New York State Department of Motor Vehicles **DIVISION OF LABOR RELATIONS** REPORT OF WORKPLACE VIOLENCE INCIDENT

Please fill out the form as accurately as possible and fax it to the Division of Field

S	FFICE U	SE ONLY	
FILE NUMBER:	WVo	2051	5A
Received:			
X RE:			
X RE:			
PRIVACY CO	NCERN:	YES	□ NO

invocation at (518) 474-7543 A	ND Labo	r Relations	at (518)	474-	8423.	If the		X RE:			
investigation at (518) 474-7543 AND Labor Relations at (518) incident is a written threat, please include a copy of the letter				ne letter	ter with this report. folder at the primary							
Originals should be maintained in a workplace violence report for office that the reporter works in.			eport fol	XRE:								
			-P	PRIVA				PRIVACY CONCERN:		YES	□ NO	
office that the reporter	WOIRD	,			•		L					
NAME OF INDIVIDUAL	EU ING BEDOL	Э т										
	, FILING REPOR	Title			Office L	ocation				PI	one Numbe	Γ
Name Melanie Levine		SMVR1	_				South T	VB			18-266-5	
ACTORING DOARING		0,10101	·	· .								
	. 70											*
NCIDENT REPORTED	Person Reporte	J To				Title						,
Date Reported 02/05/15	Jean Flana						Operati	ons M	lanager			
32/03/13	I C COMP			·								
MOIDENT												
INCIDENT Date	Time	Ø AM	Location of C	ccurrence	<u> </u>							
02/ 05/ 15	9:55	_ DPM	Lobby of			Sout	h TVB					
DFI Contacted? Yes	DFI Contact Name	LAL-1129/14-9*		hill -								
. ₩ No	·				,							
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EMPLOYEES INVOLV	ED											
Name					Title		*					
Name					Title							
		······································	**************************************		Title							
Name				-	114-4							
OUTSIDE INDIVIDUAL	S INVOLVED											
Name				Sex	€ M	ale	Phone			Clier	nt ID#	
Paul Perez						male	718-688	-5654		72	3587541	·
Address			Married Married State Communities of the Community of the	City					State		Zip Code	1014
288 Bay 38th	St 25				okly			J	ŅY			1214
Name				Sex	<u> </u>		Phone			Clier	nt ID#	
Mario Capogro	880		Had allocate to the second of the second of the	City	<u>LJF</u>	emale			State		Zip Code	n armendif Shipper monance.
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Address	es marinal e del pri o consensamento consensamento e escribir particolor de la del primito del p	* *** ***** *** ** *** *** *** *** ***	дрично менено вышения на село кол IP (City	motore Harldrander	······································	PHI Children		State		Zip.Code	
WITNESSES				·			T					.,
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02/05/2015 13:36

17186363943

TVB ADMINISTRATION 17186363943

TVB ADMINISTRATION

02/05/2015 14:00

1718-265-7479

RECEIVED 02/05/2015 12:47 BROOKLYN SOUTH

PAGE 03/04

Description of Events Leading to the Incident and What Occured:

Attorney Capogrosso had represented Mr. Perez at trial for three violations on 01/21/15. His fines were due yesterday, on 02/04/15, and now included three suspension termination fees.

Attorney Capogrosso and Mr. Perez engaged in a very loud verbal argument, in the lobby, with

Attorney Capogrosso and Mr. Perez engaged in a very loud verbal argument, in the lobby, with

threats of socialating to a physical alternation, outside in the parking lot. Based on witness

threats of socialating to a physical alternation, outside in the parking lot. Based on the

statements, at first Mr. Perez appeared to be in favor of meeting Attorney Capogrosse in the

naving lot but they can on the complete of the parking lot. parking lot, but them got on the cashiers' line instead. Attorney Capogrosso continued to verbally provoke Mr. Perez into going outside, while he was on line, and throughout his experience at the service counter, being helped by MVR Melissa. I spoke to Mr. Perez, at the counter, regarding his questions about the STFs and about how to possibly file a complaint about his diseatisfaction with the services provided by Attorney Capogrosso. When I returned to the back office, I could hear the verbal confrontation starting up again and I called the police room for assistance.

Nature and Ex	tent of	Minties:
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None.

Additional Comments:

Please also see the attached statement from the motorist, Paul Persz.

Melanie Levine Name of Individual Filing Report	Jean Flanagem Nemo of Supervisor
Mulaus Living Signature of Individual Filing Report	Signature of Supervisor
02/05/15	02/05/15 Opts

Page 2 of 2

MILASSA (12/11)

Date

Case 1:18-cv-02710-EK-LB Document 207 Filed 05/17/21 Page 3 of 4 PageID #: 2326 Was Capacuso Pind morio 688-5

New York State Department of Motor Vehicles



Coney Island Traffic Violations Bureau 2875 West 8th Street Brooklyn, New York 11224



Date:	2515	5		
То:	Labor	Relations		
From:	Melanie	Levine		
Number	of pages i	ncluding cov	versheet: _	4

Our Telephone: 718-266-6867 Our Fax: 718-266-7478

	Workplace	<u>Vidence</u>	<u>Incident</u>			
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